



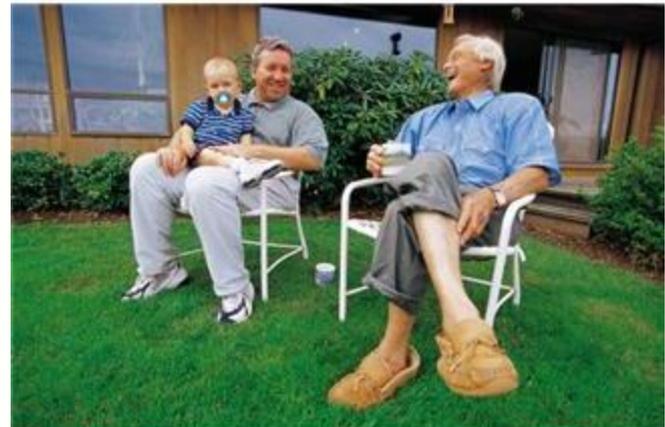
Diamond State Health Plan Plus 

DSHP-Plus

As of November 22, 2011

What is Diamond State Health Plan Plus?

- ✦ Mandatory Managed / Integrated Long Term Care
- ✦ Integrates Nursing Facility (NF) services and Home and Community Based Services (HCBS) for the elderly and adults with physical disabilities into the existing managed care delivery system



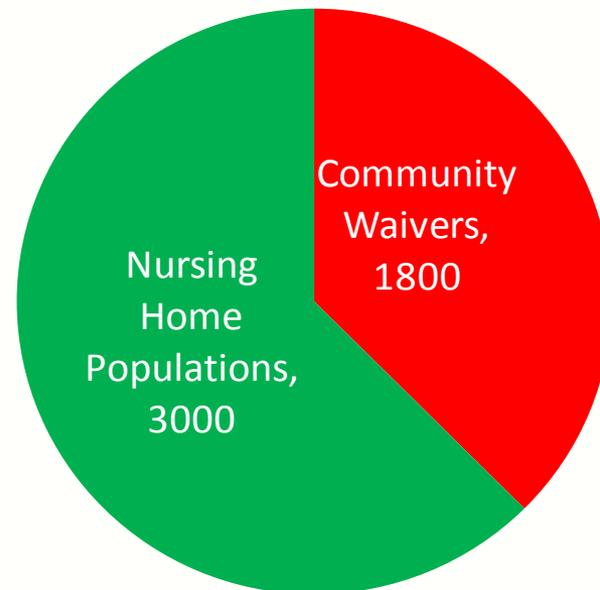
Today's Diamond State Health Plan

- ✦ Managed Care Delivery System
 - Operational since Jan 1996
 - Serves the non-Long Term Care population
 - Full benefit dual eligibles excluded
 - Operates under an 1115 Waiver



Today's Long Term Care Medicaid

- + Fragmented and disjointed
- + Heavily institutional
- + Limited options and choices
- + Fee-for-service (FFS)



Referrals and Eligibility for DSHP Plus - Institutional, HCBS and AIDS

Today

- ✦ Two ways to enter Long Term Care
 - ✦ DMMA/Central Intake Unit (CIU)
 - ✦ DSAAPD/ Intake
- ✦ Two ways to have Medical eligibility determined
 - ✦ DMMA- NF, OSR, 30 Day, AIDS Waiver
 - ✦ DSAAPD – Elderly & Disabled Waiver (E&D)
(E & D, Assisted Living, ABI)
- ✦ Financial Eligibility under DMMA

April 2012

- ✦ One Central Intake statewide under DMMA
- ✦ One Central Medical determination under DMMA
- ✦ Financial Eligibility under DMMA

Populations Included in Expansion

- ✦ Nursing Facility/Institutionalized
- ✦ HCBS groups
 - ✦ Existing E/D and AIDS waiver participants; existing 1915c waivers will be “folded into” the 1115 waiver
- ✦ Money Follows the Person (MFP) will be incorporated into the DSHP-Plus expansion
- ✦ Other full benefit dual eligibles in the community
- ✦ Medicaid for Workers with Disabilities (MWD)

Populations Excluded in Expansion

- ✦ Individuals in the Developmental Disability waiver
- ✦ Individuals residing in ICF/MRs
 - ✦ Stockley Center
 - ✦ Mary Campbell Center
- ✦ Partial duals
 - ✦ QMB and SLMB
- ✦ State-only/non-Medicaid groups
- ✦ Individuals who choose to enroll in the Program for All Inclusive Care for the Elderly (PACE)
- ✦ Only in need of the 30-day Acute Care Hospital program
- ✦ Out of state (OOS) rehab placements at time of implementation
 - ✦ Future OOS placement will be included

What are the goals of this new program?

- ✦ Increase options for those who need long term care by expanding access to HCBS
- ✦ Increase coordination of care, transitions in care and supports to maintain/improve health status
 - ✦ Avoid/divert need for costly NF services
 - ✦ Serve consumers in cost-effective settings that meet their needs
- ✦ Give consumers more choice and a greater voice
- ✦ Begin to improve care coordination for dual eligibles to maintain health/functional status
- ✦ Create a budget structure that allows resources to shift from institutions to community-based services and promote more care coordination

Key Design Elements

- ✦ Leveraging other States' program experience
 - ✦ TennCare Choices
 - ✦ Arizona ALTCS
- ✦ Capitalizing on the program design effort from 2000
- ✦ Amending 1115 demonstration waiver
- ✦ Eligible individuals will have a choice of at least two managed care plans and new PACE site
- ✦ Comprehensive full-risk capitation
- ✦ Aggressive oversight/monitoring of LTC expansion by State staff
- ✦ April 2012 program implementation date

Benefit Package Comparison

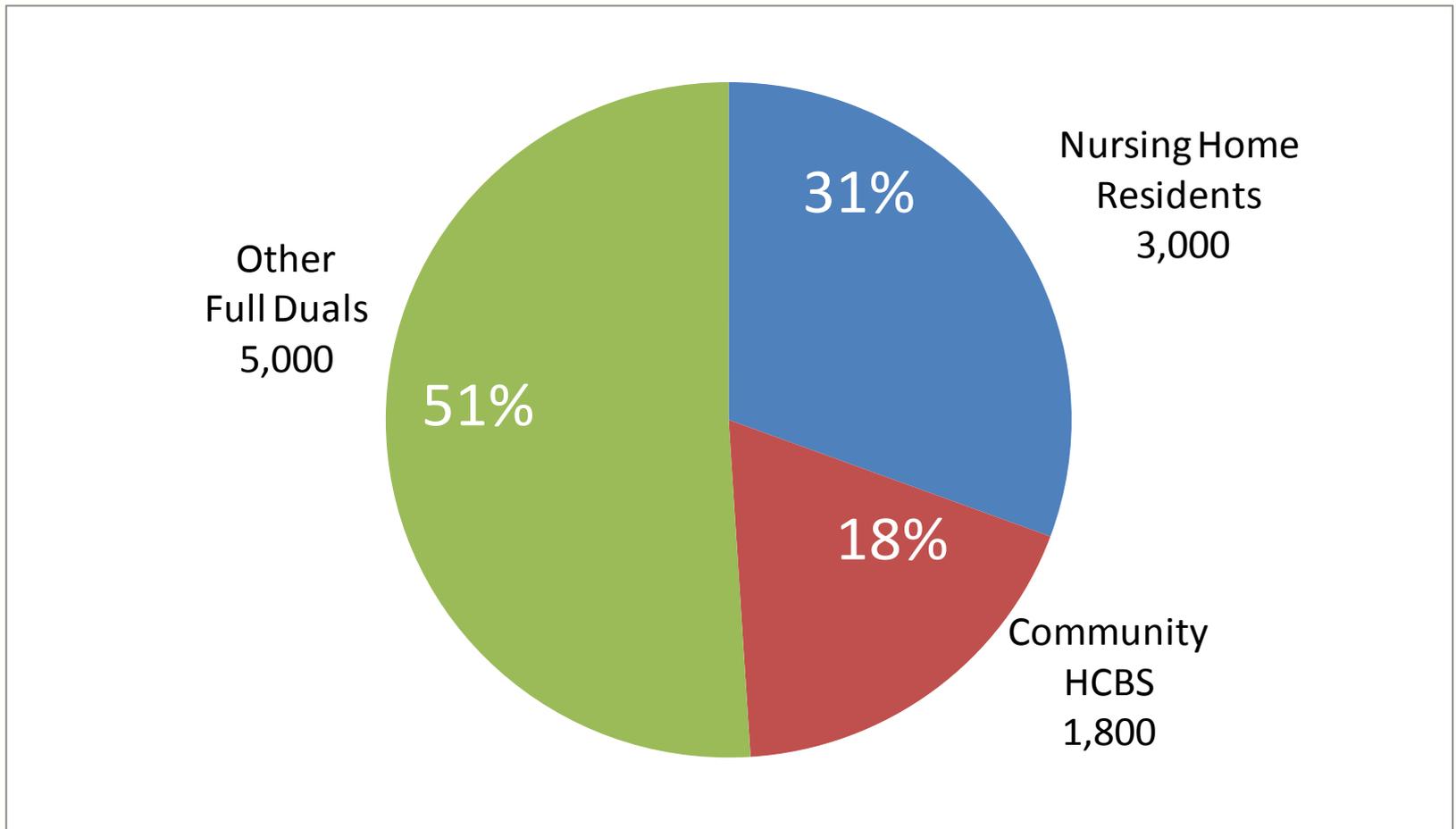
DSHP Benefits

- Acute Care Services
- In Patient Hospitalization
- Out Patient Visits
- 30 days Institutional Care
- Behavioral Health
- Limited Case Management
- Limited Durable Medical Equipment

DSHP-Plus Benefits

- Case Management Services
- Nursing Facility Care
- Assisted Living Care
- Personal Care Services
- Respite Care
- Home Delivered Meals
- Day Habilitation
- Cognitive Services
- Consumer Directed Attendant Care
- Transition Services
- Adult Day Services
- Personal Emergency Response
- Nutritional Supplements for the AIDS Population
- Home Modifications

Estimated DSHP-Plus Enrollment at Implementation





**Long Term Care Medicaid
April 2012
Diamond State Health Plan - Plus**

- ✓ Managed Care approach to service delivery
- ✓ Increased access to Community Based Services
- ✓ Decreased fragmentation and improved care coordination

Timeline – 2011 (tasks are ongoing)

February

- Kick Off
- Initial Steering Committee Meeting

March

- Program Design
- Communication Plan

April

- Community Stakeholder Involvement
- System Design

Timeline – 2011 (tasks are ongoing)



May

- MCO Discussions



June

- Concept Paper Submitted to CMS
- Stakeholder Communications thru December



Nov

- Notice to Clients

Timeline – (tasks are ongoing)

Dec

- DMMA / MCO Readiness Review

Jan

- Open Enrollment Begins
- January 1, 2012 – February 15, 2012

April

- Program Implementation

We Need You!

- ✓ Communicate to your stakeholders
- ✓ Aid in the transition of the new program
- ✓ Solicit comments
- ✓ Engage in outreach to your consumers
- ✓ Ask questions
- ✓ Share concerns

The DMMA Mission Statement

The Mission of the Division of Medicaid & Medical Assistance is to improve health outcomes by ensuring that the highest quality medical services are provided to the vulnerable populations of Delaware in the most cost effective manner.



Questions?

- + Attend Future Road Shows
- + E-mail @
DHSS_DMMA_DSHP_Plus@state.de.us
(dhss_dmma_dshp_plus@state.de.us)
- + Check the DMMA Website @
<http://dhss.delaware.gov/dhss/dmma/dshpplus.html>

